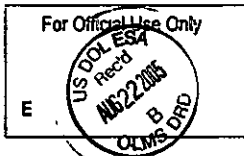


LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

 No 1215 0188
Expires 11 30 2006

This report is mandatory under P L 86 257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U S C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U- <u>10839</u>	2 Fiscal Year Covered From <u>1</u> / <u>1</u> / <u>004</u> Through <u>12</u> / <u>31</u> / <u>2004</u>
3 Name and address of person filing Name <u>Michael</u> <u>L</u> <u>Prince</u> P O Box, Bldg, Room No., if any <u>6213</u> Street <u>East Dayton Dr</u> City <u>Coalton</u> State <u>Illinois</u> ZIP Code + 4 <u>62898</u>	4 Name, file number, and address of labor organization Name <u>Brotherhood of Locomotive Engineers & Trainmen</u> Labor Organization File Number <u>006214</u> P O Box, Building and Room Number, if any _____ Street <u>P O Box 72</u> City <u>Salem</u> State <u>Illinois</u> ZIP Code + 4 <u>62881</u>
5 Position in labor organization <u>Local Representative</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions).

A Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent	
6 Name and address of Employer (including trade name, if any) Name <u>Union Pacific Railroad</u> Trade Name, if any _____ P O Box, Bldg, Room No., if any <u>100</u> Street <u>N Broadway</u> City <u>St Louis</u> State <u>Missouri</u> ZIP Code + 4 <u>63102</u>	7 a Nature of Interest, Transaction, or Income <u>I went to I think safety meetings in 2004 and the company made up a lost wage that I had I think it amounted to around 1000.00. and this income was taxed.</u> 7 b Amount <u>\$1,000</u>

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

On

8/12/05
Date

618-735-2238
Telephone Number

Name of Person Filing Michael Prince	File Number U-
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name, if any)

Name _____
Trade Name, if any _____
P O Box, Bldg, Room No, if any _____
Street _____
City _____
State _____ ZIP Code + 4 _____

9 Business deals with

- ☐ a Labor Organization
☐ b Trust
☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name Stephen H Tillery Law
Trade Name, if any _____
P O Box, Bldg, Room No, if any 701
Street Market Street
City St Louis, Missouri
State Missouri ZIP Code + 4 63101

11 a Nature of such dealing

I called Tillery Law firm and asked if they had any baseball tickets for Cardinal Games in 2004. I am not for sure but think I asked for a total of 6 or 8 tickets for the whole 2004 season value I am not sure of

11 b Approximate dollar value of such dealing

12 a Nature of interest held or income received

12 b Amount

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name, if any)

Name _____
Trade Name, if any _____
P O Box, Bldg, Room No, if any _____
Street _____
City _____
State _____ ZIP Code + 4 _____

14 a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14 b Amount of payment

Name of Person Filing Michael Prince	File Number U-
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

<p>8 Name and address of Business (including trade name, if any)</p> <p>Name _____</p> <p>Trade Name, if any _____</p> <p>P O Box, Bldg , Room No , if any _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p>	<p>9 Business deals with</p> <p><input type="checkbox"/> a Labor Organization</p> <p><input type="checkbox"/> b Trust</p> <p><input type="checkbox"/> c Employer</p>
<p>10 If 9 b or 9 c is checked give trust or employer's name</p> <p>Name <u>Schlichter, Boqarc & Dente</u></p> <p>Trade Name, if any _____</p> <p>P O Box, Bldg , Room No , if any <u>100 S 4th St., Suite 900</u></p> <p>Street <u>Market Street</u></p> <p>City <u>St Louis</u></p> <p>State <u>Missouri</u> ZIP Code + 4 <u>63102</u></p>	<p>11 a Nature of such dealing</p> <p>I called Schlichter Law firm and asked if they had any baseball tickets for Cardinal Games in 2004 I asked for 2 tickets for the whole 2004 season value I am not sure of</p> <p>11 b Approximate dollar value of such dealing _____</p> <p>12 a Nature of interest held or income received</p> <p>_____</p> <p>12 b Amount _____</p>

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

<p>13 a Name and address of Employer or Labor Relations Consultant (including trade name, if any)</p> <p>Name _____</p> <p>Trade Name, if any _____</p> <p>P O Box, Bldg , Room No , if any _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p>	<p>14 a Nature of payment</p> <p>_____</p>
<p>13 b Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14 b Amount of payment _____</p>